

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Anna Eshoo for Congress

ADDRESS (number and street) 555 Capitol Mall, Suite 1425
 Check if different than previously reported. (ACC)
Sacramento CA 95814

2. **FEC IDENTIFICATION NUMBER** C00258475
CITY **STATE** **ZIP CODE**
STATE **DISTRICT**
3. IS THIS REPORT NEW (N) OR AMENDED (A)
CA 14

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on [] [] [] in the State of []
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on [] [] [] in the State of []

5. Covering Period 05 18 2006 through 06 30 2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Bruce Ives
Signature of Treasurer Electronically Filed by Bruce Ives Date 08 22 2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Anna Eshoo for Congress

Report Covering the Period:

From:

M	M
0	5

D	D
1	8

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	78226.73	645166.06
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	1700.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	78226.73	643466.06
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	45546.33	460637.34
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	1733.69
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	45546.33	458903.65
8. Cash on Hand at Close of Reporting Period (from Line 27).....	385743.98	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	5661.67	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name
Anna Eshoo for Congress

Report Covering the Period: From:

M	M
0	5

D	D
1	8

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

35200.00

299200.00

(ii) Unitemized.....

2944.00

21328.25

(iii) TOTAL of contributions

38144.00

320528.25

from individuals..... ▶

0.00

5.08

(b) Political Party Committees.....

40082.73

324632.73

(c) Other Political Committees (such as PACS).....

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

78226.73

645166.06

(add Lines 11(a)(iii), (b), (c), and (d))

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

0.00

1733.69

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

563.28

3989.09

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

78790.01

650888.84

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	45546.33	460637.34
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	1700.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	1700.00
21. OTHER DISBURSEMENTS.....	39350.00	235610.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	84896.33	697947.34

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	391850.30
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	78790.01
25. SUBTOTAL (add Line 23 and Line 24).....	470640.31
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	84896.33
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	385743.98

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 / 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
William T. Archey

Mailing Address 501 Hilltop Terrace

City State Zip Code
Alexandria VA 22301

FEC ID number of contributing federal political committee. **C**

Name of Employer American Electronics Association
Occupation President / Chief Executive Officer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 29 / 2006

Transaction ID: A4381

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Carol A. Bartz

Mailing Address 82 Isabella Avenue

City State Zip Code
Atherton CA 94027

FEC ID number of contributing federal political committee. **C**

Name of Employer Autodesk, Inc.
Occupation Chief Executive Officer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 14 / 2006

Transaction ID: A4357

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Contribution received through conduit TechNet PAC

C. Full Name (Last, First, Middle Initial)
TechNet Political Action Committee

Mailing Address 2600 East Bayshore Road, 1st Floor

City State Zip Code
Palo Alto CA 94303

FEC ID number of contributing federal political committee. **C**

Name of Employer
Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼
N/A

Election Cycle-to-Date ▼
.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 14 / 2006

Transaction ID: INT82

Amount of Each Receipt this Period
2000.00

Receipt amount is total from conduit.
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]
Conduit for above contribution.

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	PAGE 6 / 56
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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
Paul Berg

Mailing Address 838 Santa Fe Avenue

City State Zip Code
Stanford CA 94305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Stanford University Professor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
700.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 4 / 2 0 0 6

Transaction ID: A4282

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Bruce Chizen

Mailing Address 644 San Martin Place

City State Zip Code
Los Altos CA 94024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Adobe Systems, Inc. Manager

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 2 / 2 0 0 6

Transaction ID: A4404

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Elizabeth L. Colton

Mailing Address 1848 Pine Street

City State Zip Code
San Francisco CA 94109

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-employed Investor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 6

Transaction ID: A4300

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
Joseph W. Cotchett

Mailing Address 840 Malcolm Rd.

City State Zip Code
Burlingame CA 94010

FEC ID number of contributing federal political committee. **C**

Name of Employer
Cotchett, Pitre, Simon & McCarthy

Occupation
Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4200.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 01 / 2006

Transaction ID: A4308

Amount of Each Receipt this Period
2100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Joseph W. Cotchett

Mailing Address 840 Malcolm Rd.

City State Zip Code
Burlingame CA 94010

FEC ID number of contributing federal political committee. **C**

Name of Employer
Cotchett, Pitre, Simon & McCarthy

Occupation
Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4200.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 01 / 2006

Transaction ID: A4309

Amount of Each Receipt this Period
2100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Victoria Cotchett

Mailing Address 840 Malcolm Rd.

City State Zip Code
Burlingame CA 94010

FEC ID number of contributing federal political committee. **C**

Name of Employer
Victoria Cotchett, Writer

Occupation
Writer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4200.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 01 / 2006

Transaction ID: A4310

Amount of Each Receipt this Period
2100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	6300.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

Full Name (Last, First, Middle Initial) A. Victoria Cotchett		Date of Receipt M M / D D / Y Y Y Y 06 / 01 / 2006	
Mailing Address 840 Malcolm Rd.		Transaction ID: A4311	
City State Zip Code Burlingame CA 94010		Amount of Each Receipt this Period 2100.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Victoria Cotchett, Writer	Occupation Writer		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4200.00		

Full Name (Last, First, Middle Initial) B. Michelle W. Eldridge		Date of Receipt M M / D D / Y Y Y Y 05 / 24 / 2006	
Mailing Address 801 Columbia Circle		Transaction ID: A4284	
City State Zip Code Redwood City CA 94065-1743		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Michelle Eldridge, Realty	Occupation Realtor		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Carol Emmott		Date of Receipt M M / D D / Y Y Y Y 06 / 06 / 2006	
Mailing Address 229 Bridge Road		Transaction ID: A4336	
City State Zip Code Hillsborough CA 94010		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Hame-Lewis	Occupation Executive Recruiter		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional) ▶	2550.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
Michael E. Fox

Mailing Address 14571 Quito Rd.

City State Zip Code
Saratoga CA 95070

FEC ID number of contributing federal political committee. **C**

Name of Employer M.E. Fox & Co., Inc. Occupation Executive

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 1 8 / 2 0 0 6

Transaction ID: A4297

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Thomas J. Furst

Mailing Address 10 Reyna Place

City State Zip Code
Menlo Park CA 94025

FEC ID number of contributing federal political committee. **C**

Name of Employer SRI International Occupation Chief Financial Officer

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 6

Transaction ID: A4299

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
James C. Gaither

Mailing Address 418 El Arroyo Road

City State Zip Code
Hillsborough CA 94010-2406

FEC ID number of contributing federal political committee. **C**

Name of Employer Sutter Hill Ventures Occupation Investor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 6

Transaction ID: A4302

Amount of Each Receipt this Period
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1700.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

Full Name (Last, First, Middle Initial) A. Fred Gellert, Jr.		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address 93 West Shore Road		Transaction ID: A4293
City State Zip Code Belvedere CA 94920	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Gellert Real Estate Partner	Election Cycle-to-Date 500.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) B. Lynn Gibbons		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 320 Tennyson Avenue		Transaction ID: A4403
City State Zip Code Palo Alto CA 94301	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Homemaker Homemaker	Election Cycle-to-Date 2000.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) C. Philip R. Lee		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 6
Mailing Address 101 Alma Street, Unit 805		Transaction ID: A4353
City State Zip Code Palo Alto CA 94301	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Stanford University Physician	Election Cycle-to-Date 500.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional)	2000.00
TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
George M. Marcus

Mailing Address 777 South California Avenue

City Palo Alto State CA Zip Code 94304

FEC ID number of contributing federal political committee. **C**

Name of Employer Marcus & Millichap, Inc. Occupation Chairman, Real Estate Investment

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2100.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 3 0 / 2 0 0 6

Transaction ID: A4304

Amount of Each Receipt this Period
2100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Judith Marcus

Mailing Address 27900 Black Mountain Road

City Los Altos Hills State CA Zip Code 94022

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2100.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 5 / 2 0 0 6

Transaction ID: A4338

Amount of Each Receipt this Period
2100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Anthony P. Meier

Mailing Address 124 Isabella Avenue

City Atherton State CA Zip Code 94027

FEC ID number of contributing federal political committee. **C**

Name of Employer Anthony P. Meier, Volunteer Occupation Community Service

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 7 / 2 0 0 6

Transaction ID: A4374

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **5200.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
Beverly Merrill

Mailing Address 2995 Woodside Road, #400

City Woodside State CA Zip Code 94062

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 2 7 / 2 0 0 6

Transaction ID: A4373

Amount of Each Receipt this Period
 300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
George Michael Miller

Mailing Address 205 First Street

City Napa State CA Zip Code 94559

FEC ID number of contributing federal political committee. **C**

Name of Employer The Ferguson Group Occupation Lobbyist

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 0 6 / 2 0 0 6

Transaction ID: A4334

Amount of Each Receipt this Period
 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Patrick J. Mitchell

Mailing Address 444 North Capitol Street, NW, Suite 840

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C**

Name of Employer Strategic Impact Occupation Government Relations-Issues Mgmt.

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 2 4 / 2 0 0 6

Transaction ID: A4363

Amount of Each Receipt this Period
 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1300.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
John P. Morgridge

Mailing Address 107 Mapache Drive

City State Zip Code
Portola Valley CA 94028

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Cisco Systems Chairman

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4200.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 6

Transaction ID: A4320

Amount of Each Receipt this Period
2100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
John P. Morgridge

Mailing Address 107 Mapache Drive

City State Zip Code
Portola Valley CA 94028

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Cisco Systems Chairman

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4200.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 6

Transaction ID: A4321

Amount of Each Receipt this Period
2100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Juliet Pacquing

Mailing Address 3509 King Arthur Road

City State Zip Code
Annandale VA 22003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Pacquing Consulting Consultant

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: A4390

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	4450.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
Anthony T. Podesta

Mailing Address 6106 Beachway Drive

City Falls Church State VA Zip Code 22041

FEC ID number of contributing federal political committee. **C**

Name of Employer PodestaMattoon Occupation Chairman

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 2 3 / 2 0 0 6

Transaction ID: A4405

Amount of Each Receipt this Period
 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Dr. Francis Polansky

Mailing Address 1681 El Camino Real

City Palo Alto State CA Zip Code 94306

FEC ID number of contributing federal political committee. **C**

Name of Employer Nova In-Vitro Fertilization Occupation Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 3 1 / 2 0 0 6

Transaction ID: A4318

Amount of Each Receipt this Period
 200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Lisa S. Pritzker

Mailing Address 3265 Sacramento Street

City San Francisco State CA Zip Code 94115

FEC ID number of contributing federal political committee. **C**

Name of Employer Lisa Pritzker, Community Activist Occupation Community Activist

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 2 2 / 2 0 0 6

Transaction ID: A4355

Amount of Each Receipt this Period
 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	▶	1700.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
Carl Ross

Mailing Address 4 Library Court, SE

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C**

Name of Employer Save America's Forest Occupation Director

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1550.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 6

Transaction ID: A4392

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Scher & Bassett Attorneys at Law

Mailing Address 465 South Mathilda Avenue, Suite 210

City Sunnyvale State CA Zip Code 94086

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 6

Transaction ID: A4341

Amount of Each Receipt this Period
500.00

Partnership Attribution See Below
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Meyer Scher

Mailing Address 465 South Mathilda Avenue, Suite 210

City Sunnyvale State CA Zip Code 94086

FEC ID number of contributing federal political committee. **C**

Name of Employer Scher & Bassett, Attorneys at Law Occupation Managing Partner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 1 3 / 2 0 0 6

Transaction ID: P15

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

Full Name (Last, First, Middle Initial) A. Douglas Shorenstein		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 219 Spruce Street		Transaction ID: A4289
City State Zip Code San Francisco CA 94118	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer The Shorenstein Company	Occupation Realtor	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Carole Shorenstein Hays		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6
Mailing Address 555 California Street, Suite 4900		Transaction ID: A4290
City State Zip Code San Francisco CA 94104	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer ShorensteinHays Nederland-er Theater	Occupation President	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Richard W. Solarz		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 0 6
Mailing Address 79 Hillview Drive		Transaction ID: A4364
City State Zip Code Danville CA 94506	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer KLA Tencor Corporation	Occupation Sr. Director Tech Development	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	2500.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 56
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
Peter S. Stamos

Mailing Address 450 Park Avenue

City State Zip Code
New York NY 10022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Sterling Stamos Chairman

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1000.00

Date of Receipt
MM / DD / YYYY
06 / 14 / 2006

Transaction ID: A4358

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Contribution received through conduit Walter H. Shorenstein

B. Full Name (Last, First, Middle Initial)
Walter H. Shorenstein

Mailing Address 555 California Street

City State Zip Code
San Francisco CA 94104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
The Shorenstein Company President

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
N/A

.00

Date of Receipt
MM / DD / YYYY
06 / 14 / 2006

Transaction ID: INT83

Amount of Each Receipt this Period
1000.00

Receipt amount is total from conduit.
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]
Conduit for above contribution.

C. Full Name (Last, First, Middle Initial)
Jon Tiemann

Mailing Address 18 McCormick Lane, MS 620

City State Zip Code
Atherton CA 94027

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Tiemann Investments Investor

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
MM / DD / YYYY
05 / 30 / 2006

Transaction ID: A4305

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 / 56
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
Daniel A. Turton

Mailing Address 1875 Eye Street, NW, Suite 400

City State Zip Code
Washington DC 20003

FEC ID number of contributing federal political committee. **C**

Name of Employer Timmons and Company, Inc. Occupation Vice President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2006

Transaction ID: A4393

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Paula G. Uccelli

Mailing Address 1 Uccelli Blvd.

City State Zip Code
Redwood City CA 94063

FEC ID number of contributing federal political committee. **C**

Name of Employer Pete's Harbor Occupation Business Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 14 / 2006

Transaction ID: A4359

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	35200.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 56
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

Full Name (Last, First, Middle Initial) A. Abbott Laboratories Employee PAC		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 6
Mailing Address 100 Abbott Park Road		Transaction ID: A4350
City Abbott Park	State IL	Zip Code 60064
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) B. AFLAC Incorporated PAC		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address 1932 Wynnton Road		Transaction ID: A4379
City Columbus	State GA	Zip Code 31999
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. American Assn of the Orthopaedic Surgeons PAC		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6
Mailing Address 317 Massachusetts Avenue, NE		Transaction ID: A4313
City Washington	State DC	Zip Code 20002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

SUBTOTAL of Receipts This Page (optional)	▶	4000.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

Full Name (Last, First, Middle Initial)
A. American Dietetic Association PAC (ADAPAC)
 Mailing Address 1120 Connecticut Avenue, NW, Suite 480
 City Washington State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2006
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 3 0 / 2 0 0 6
Transaction ID: A4380
 Amount of Each Receipt this Period
 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)
B. American Podiatric Medical Association PAC (PPAC)
 Mailing Address 9312 Old Georgetown Road
 City Bethesda State MD Zip Code 20814-1698
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2006
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 1 9 / 2 0 0 6
Transaction ID: A4351
 Amount of Each Receipt this Period
 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)
C. AMGEN, Inc. PAC
 Mailing Address 1840 De Havilland Drive
 City Thousand Oaks State CA Zip Code 91320-1789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2006
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 1 4 / 2 0 0 6
Transaction ID: A4342
 Amount of Each Receipt this Period
 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3000.00**
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 / 56
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

Full Name (Last, First, Middle Initial) A. Applied Materials, Inc. PAC		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6
Mailing Address 20 Park Road, Suite E		Transaction ID: A4314
City State Zip Code Burlingame CA 94010	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Arnold & Porter Partners PAC		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address 555 12th Street, NW		Transaction ID: A4391
City State Zip Code Washington DC 20004	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) C. Automotive Aftermarket PAC		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address 4600 East West Highway, Suite 300		Transaction ID: A4383
City State Zip Code Bethesda MD 20814-3415	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 2000.00		

SUBTOTAL of Receipts This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 56
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
Bristol-Myers Squibb Employee PAC

Mailing Address 345 Park Avenue

City State Zip Code
New York NY 10154

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 6

Transaction ID: A4332

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Burson-Marsteller/Young Rubicam PAC

Mailing Address 1801 K Street, NW, Suite 901L

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 9 / 2 0 0 6

Transaction ID: A4382

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Consumer Electronics Association PAC Account

Mailing Address 2500 Wilson Blvd.

City State Zip Code
Arlington VA 22201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 0 6

Transaction ID: A4361

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	2500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 23 / 56
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

Full Name (Last, First, Middle Initial) A. Credit Union Legislative Action Council		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6
Mailing Address 601 Pennsylvania Avenue, NW, Suite 600		Transaction ID: A4331
City State Zip Code Washington DC 20005-2207	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Deloitte & Touche Federal PAC		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 6
Mailing Address P.O. Box 365		Transaction ID: A4335
City State Zip Code Washington DC 20044-0365	Amount of Each Receipt this Period 3000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. eBay, Inc. Committee for Responsible Internet Commerce		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 1200 G Street, NW		Transaction ID: A4384
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) ▶	5000.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 / 56
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
Reed Elsevier, Inc. Political Action Committee

Mailing Address 1150 18th Street, NW, Suite 600

City State Zip Code
Washington DC 20096

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 6 / 2 0 0 6

Transaction ID: A4329

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Express Scripts Inc., Political Fund

Mailing Address 13900 Riverport Drive

City State Zip Code
Maryland Heights CA 63043

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 1 4 / 2 0 0 6

Transaction ID: A4343

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Genentech, Inc. Political Action Committee

Mailing Address 1 DNA Way

City State Zip Code
San Francisco CA 94080

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 6

Transaction ID: A4315

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 56
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

Full Name (Last, First, Middle Initial) A. General Dynamics Voluntary Political Contribution Plan		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 6
Mailing Address 3190 Fairview Park Drive		Transaction ID: A4352
City Falls Church State VA Zip Code 22042-4523	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Genworth Financial, Inc. Political Action Committee		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address 6620 West Broad Street		Transaction ID: A4385
City Richmond State CA Zip Code 23230	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Friends of Supervisor Rose Jacobs Gibson 2004		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 6
Mailing Address 20 Park Road, Suite E		Transaction ID: A4349
City Burlingame State CA Zip Code 94010-4443	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Federally Permissible Funds <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00	

SUBTOTAL of Receipts This Page (optional) ▶	2100.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 56
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

Full Name (Last, First, Middle Initial) A. The GlaxoSmithKline PAC		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2006
Mailing Address Five Moore Drive		Transaction ID: A4344
City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) B. Heineken USA Good Government Fund		Date of Receipt M M / D D / Y Y Y Y 06 / 27 / 2006
Mailing Address 360 Hamilton Avenue, Suite 1103		Transaction ID: A4369
City State Zip Code White Plains NY 10601	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. The Intuit 21st Century Leadership Fund		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006
Mailing Address 6220 Greenwich Drive		Transaction ID: A4386
City State Zip Code San Diego CA 92122	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 3000.00		

SUBTOTAL of Receipts This Page (optional) ▶	4000.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 27 / 56
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

Full Name (Last, First, Middle Initial) A. Johnson & Johnson Employees' Good Govt. Fund		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 4 / 2 0 0 6
Mailing Address One Johnson & Johnson Plaza		Transaction ID: A4362
City State Zip Code New Brunswick NJ 08933-7204	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) B. KPMG PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 6 / 2 0 0 6
Mailing Address P.O. Box 18254		Transaction ID: A4333
City State Zip Code Washington DC 20036-9998	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Loral Spacecom Civic Responsibility Fund		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 1 / 2 0 0 6
Mailing Address 2400 Research Blvd., Suite 200		Transaction ID: A4316
City State Zip Code Rockville MD 20850	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 482.73
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2982.73	

SUBTOTAL of Receipts This Page (optional)	▶	2482.73
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
Medtronic, Inc. Medical Technology Fund

Mailing Address 1420 New York Avenue, NW, Suite 600

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 9 / 2 0 0 6

Transaction ID: A4387

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Merck Employees PAC

Mailing Address 601 Pennsylvania Avenue, NW, Suite 1200

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: A4388

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Microsoft Corporation PAC

Mailing Address 16011 NE 36th Way

City State Zip Code
Redmond WA 98073-9717

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 6

Transaction ID: A4345

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 56
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
Novartis Political Action Committee

Mailing Address 701 Pennsylvania Avenue, NW, Suite 725

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 3 0 / 2 0 0 6

Transaction ID: A4389

Amount of Each Receipt this Period
 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Pfizer, Inc. PAC

Mailing Address 235 East 42nd Street

City New York State NY Zip Code 10017

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 1 5 / 2 0 0 6

Transaction ID: A4346

Amount of Each Receipt this Period
 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Semi Political Alliance of Semiconductor Equipment and Materials International PAC

Mailing Address 20 Park Road, Suite E

City Burlingame State CA Zip Code 94010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 0 1 / 2 0 0 6

Transaction ID: A4317

Amount of Each Receipt this Period
 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	PAGE 30 / 56
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

Full Name (Last, First, Middle Initial) A. Sonnenschein Political Action Committee Federal		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address 1301 K Street, NW, Suite 600 East Tower		Transaction ID: A4347
City Washington State DC Zip Code 20005	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Spine PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 6 / 2 0 0 6
Mailing Address 22 Calendar Court, 2nd Floor		Transaction ID: A4356
City La Grange State IL Zip Code 60525	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. T-Mobile Political Action Committee		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 401 9th Street, NW, Suite 550		Transaction ID: A4295
City Washington State DC Zip Code 20004	Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5500.00	

SUBTOTAL of Receipts This Page (optional) ▶	3500.00
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 56
	(check only one)
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
T-Mobile Political Action Committee

Mailing Address 401 9th Street, NW, Suite 550

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5500.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 2 / 2 0 0 6

Transaction ID: A4296

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Tyco International US, Inc. Employees PAC

Mailing Address 9 Roszel Road

City State Zip Code
Princeton NJ 08540

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 6

Transaction ID: A4348

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	40082.73

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 56
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

Full Name (Last, First, Middle Initial) A. Comerica		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 6	
Mailing Address 455 Capitol Mall, Suite 400		Transaction ID: A4327	
City State Zip Code Sacramento CA 95814	Amount of Each Receipt this Period 62.68		
FEC ID number of contributing federal political committee. C	Interest Earned <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 889.45		

Full Name (Last, First, Middle Initial) B. Comerica		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 455 Capitol Mall, Suite 400		Transaction ID: A4398	
City State Zip Code Sacramento CA 95814	Amount of Each Receipt this Period 62.34		
FEC ID number of contributing federal political committee. C	Interest Earned <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 889.45		

Full Name (Last, First, Middle Initial) C. Placer Sierra Bank		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address P.O. Box 862		Transaction ID: A4328	
City State Zip Code Sacramento CA 95812-0862	Amount of Each Receipt this Period 189.45		
FEC ID number of contributing federal political committee. C	Interest Earned <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2957.38		

SUBTOTAL of Receipts This Page (optional) ▶	314.47
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 33 / 56
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
Placer Sierra Bank

Mailing Address P.O. Box 862

City State Zip Code
Sacramento CA 95812-0862

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2957.38

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	6	/	2	0	0	6

Transaction ID: A4402

Amount of Each Receipt this Period
237.09

Interest Earned
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	▶	237.09
TOTAL This Period (last page this line number only)	▶	551.56

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

Full Name (Last, First, Middle Initial) A. Madeleine Albright, Inc.		Transaction ID: B2233 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6	
Mailing Address 901 15th Street, NW, Suite 500		Amount of Each Disbursement this Period 638.26	
City Washington State DC Zip Code 20005	Purpose of Disbursement Fundraising Travel Expenses	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type 004		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. AT&T		Transaction ID: B2226 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6	
Mailing Address Payment Center		Amount of Each Disbursement this Period 49.48	
City Sacramento State CA Zip Code 95887	Purpose of Disbursement Phone	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. AT&T		Transaction ID: B2242 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6	
Mailing Address Payment Center		Amount of Each Disbursement this Period 32.42	
City Sacramento State CA Zip Code 95887	Purpose of Disbursement Phone	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	720.16
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 35 / 56

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

Full Name (Last, First, Middle Initial) A. Chase Card Services		Transaction ID: B2222 Date of Disbursement 05 / 22 / 2006
Mailing Address P.O. Box 94014		Amount of Each Disbursement this Period 377.58
City Palatine State IL Zip Code 60094-4014	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Gifts for Constituents Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Ah Sam Florist & Greenhouses		Transaction ID: S320 Date of Disbursement 05 / 22 / 2006
Mailing Address 2645 South El Camino Real		Amount of Each Disbursement this Period 147.17
City San Mateo State CA Zip Code 94403	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Gifts for Constituents Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Chase Card Services		Transaction ID: B2223 Date of Disbursement 05 / 22 / 2006
Mailing Address P.O. Box 94014		Amount of Each Disbursement this Period 660.21
City Palatine State IL Zip Code 60094-4014	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Meals with Constituents Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1037.79
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 36 / 56

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

Full Name (Last, First, Middle Initial) A. Empire Tap Room		Transaction ID: S321 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 651 Emerson Street		Amount of Each Disbursement this Period 189.64
City Palo Alto State CA Zip Code 94301	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Meals with Constituents	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Su Hong Restaurant		Transaction ID: S322 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address 1039 El Camino Real		Amount of Each Disbursement this Period 53.00
City Menlo Park State CA Zip Code 94025	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Meals with Constituents	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. U.S. House Members Dining		Transaction ID: S323 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6
Mailing Address U.S. Capitol Building, #H117		Amount of Each Disbursement this Period 15.00
City Washington State DC Zip Code 20515	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Meals with Constituents	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Evvia Restaurant Full Name (Last, First, Middle Initial) Mailing Address 420 Emerson Street City Palo Alto State CA Zip Code 94301 Purpose of Disbursement Meals with Constituents Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: S324 Date of Disbursement 05 / 22 / 2006 Amount of Each Disbursement this Period 189.64 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
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B. Chase Card Services Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 94014 City Palatine State IL Zip Code 60094-4014 Purpose of Disbursement Travel Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B2249 Date of Disbursement 06 / 20 / 2006 Amount of Each Disbursement this Period 1744.32 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
---	--	--

C. United Airlines Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 28871 City Tucson State AZ Zip Code 85726-8871 Purpose of Disbursement Travel Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: S325 Date of Disbursement 06 / 20 / 2006 Amount of Each Disbursement this Period 429.30 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
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SUBTOTAL of Disbursements This Page (optional) ▶	1744.32
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 38 / 56

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

Full Name (Last, First, Middle Initial) A. US Airways		Transaction ID: S326 Date of Disbursement MM / DD / YYYY 06 / 20 / 2006
Mailing Address 2345 Crystal Drive		Amount of Each Disbursement this Period 337.30 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
City Arlington State VA Zip Code 22227		
Purpose of Disbursement Travel Expenses Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Delta Air		Transaction ID: S327 Date of Disbursement MM / DD / YYYY 06 / 20 / 2006
Mailing Address 1030 Delta Blvd., SW		Amount of Each Disbursement this Period 619.30 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
City Atlanta State GA Zip Code 30354		
Purpose of Disbursement Travel Expenses Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. The Charles Hotel		Transaction ID: S333 Date of Disbursement MM / DD / YYYY 06 / 20 / 2006
Mailing Address 1 Bennett Street		Amount of Each Disbursement this Period 340.42 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
City Cambridge State MA Zip Code 02138		
Purpose of Disbursement Travel Expenses Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

Full Name (Last, First, Middle Initial) A. Chase Card Services		Transaction ID: B2250 Date of Disbursement 06 / 20 / 2006
Mailing Address P.O. Box 94014		Amount of Each Disbursement this Period 330.66
City Palatine State IL Zip Code 60094-4014	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Meals with Constituents Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Su Hong Restaurant		Transaction ID: S329 Date of Disbursement 06 / 20 / 2006
Mailing Address 1039 El Camino Real		Amount of Each Disbursement this Period 100.00
City Menlo Park State CA Zip Code 94025	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Meals with Constituents Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. U.S. House Members Dining		Transaction ID: S334 Date of Disbursement 06 / 20 / 2006
Mailing Address U.S. Capitol Building, #H117		Amount of Each Disbursement this Period 188.55
City Washington State DC Zip Code 20515	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Meals with Constituents Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	330.66
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

Full Name (Last, First, Middle Initial) A. Chase Card Services		Transaction ID: B2252 Date of Disbursement 06 / 20 / 2006
Mailing Address P.O. Box 94014		Amount of Each Disbursement this Period 34.17
City Palatine State IL Zip Code 60094-4014	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Shipping Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Federal Express		Transaction ID: S336 Date of Disbursement 06 / 20 / 2006
Mailing Address P.O. Box 7221		Amount of Each Disbursement this Period 34.17
City Pasadena State CA Zip Code 91109-7321	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Shipping Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Chase Card Services		Transaction ID: B2253 Date of Disbursement 06 / 20 / 2006
Mailing Address P.O. Box 94014		Amount of Each Disbursement this Period 25.20
City Palatine State IL Zip Code 60094-4014	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Gifts for Constituents Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	59.37
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. U.S. House of Representatives

Full Name (Last, First, Middle Initial)
Mailing Address B-217 Longworth Bldg.

City Washington State DC Zip Code 20515

Purpose of Disbursement
Gifts for Constituents

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: S337
Date of Disbursement
06 / 20 / 2006

Amount of Each Disbursement this Period
25.20

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

B. Chase Card Services

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 94014

City Palatine State IL Zip Code 60094-4014

Purpose of Disbursement
Fundraiser Food and Beverages

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: B2268
Date of Disbursement
06 / 20 / 2006

Amount of Each Disbursement this Period
1262.80

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

C. Hotel George

Full Name (Last, First, Middle Initial)
Mailing Address 15 E Street, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Fundraiser Food and Beverages

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: S338
Date of Disbursement
06 / 20 / 2006

Amount of Each Disbursement this Period
1262.80

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

1262.80

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

<p>A. Cingular Wireless</p> <p>Full Name (Last, First, Middle Initial) Anna Eshoo for Congress</p> <p>Mailing Address P.O. Box 54360</p> <p>City Los Angeles State CA Zip Code 90054</p> <p>Purpose of Disbursement Phone Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B2213 Date of Disbursement 05 / 18 / 2006</p> <p>Amount of Each Disbursement this Period 325.09</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
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<p>B. Cingular Wireless</p> <p>Full Name (Last, First, Middle Initial) Anna Eshoo for Congress</p> <p>Mailing Address P.O. Box 54360</p> <p>City Los Angeles State CA Zip Code 90054</p> <p>Purpose of Disbursement Phone Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B2254 Date of Disbursement 06 / 20 / 2006</p> <p>Amount of Each Disbursement this Period 127.26</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
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<p>C. Complete Campaigns.com</p> <p>Full Name (Last, First, Middle Initial) Complete Campaigns.com</p> <p>Mailing Address 610 Gateway Center Way, Suite K</p> <p>City San Diego State CA Zip Code 92102</p> <p>Purpose of Disbursement Credit card processing fee Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B2276 Date of Disbursement 06 / 30 / 2006</p> <p>Amount of Each Disbursement this Period 114.38</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>566.73</p>
<p>TOTAL This Period (last page this line number only)</p>	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Anna Eshoo Full Name (Last, First, Middle Initial) Anna Eshoo Mailing Address P.O. Box 1265 City Menlo Park State CA Zip Code 94026 Purpose of Disbursement Travel Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B2232 Date of Disbursement 05 / 31 / 2006 Amount of Each Disbursement this Period 61.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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B. Federal Express Full Name (Last, First, Middle Initial) Federal Express Mailing Address P.O. Box 7221 City Pasadena State CA Zip Code 91109-7321 Purpose of Disbursement Fundraising Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B2230 Date of Disbursement 05 / 26 / 2006 Amount of Each Disbursement this Period 86.05 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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C. Federal Express Full Name (Last, First, Middle Initial) Federal Express Mailing Address P.O. Box 7221 City Pasadena State CA Zip Code 91109-7321 Purpose of Disbursement Fundraising Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B2265 Date of Disbursement 06 / 30 / 2006 Amount of Each Disbursement this Period 114.11 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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SUBTOTAL of Disbursements This Page (optional) ▶	261.16
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Fiorello Consulting Full Name (Last, First, Middle Initial) Mailing Address 3914 Barcroft Mews Court City Falls Church State VA Zip Code 22041 Purpose of Disbursement Fundraising Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B2228 Date of Disbursement 05 / 26 / 2006 Amount of Each Disbursement this Period 2500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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B. Fiorello Consulting Full Name (Last, First, Middle Initial) Mailing Address 3914 Barcroft Mews Court City Falls Church State VA Zip Code 22041 Purpose of Disbursement Fundraising Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B2261 Date of Disbursement 06 / 29 / 2006 Amount of Each Disbursement this Period 2500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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C. Gryphon Web Design dba Greg Bell Full Name (Last, First, Middle Initial) Mailing Address 2960 Cowper Street City Palo Alto State CA Zip Code 94306-2417 Purpose of Disbursement Website Design Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B2264 Date of Disbursement 06 / 30 / 2006 Amount of Each Disbursement this Period 122.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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SUBTOTAL of Disbursements This Page (optional) ▶	5212.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

Full Name (Last, First, Middle Initial) A. K/P Corporation, Inc.		Transaction ID: B2235 Date of Disbursement 06 / 01 / 2006
Mailing Address 12647 Alcosta Blvd.		Amount of Each Disbursement this Period 7993.42
City San Ramon State CA Zip Code 94583	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Printing Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. National Democratic Club		Transaction ID: B2229 Date of Disbursement 05 / 26 / 2006
Mailing Address 30 Ivy Street, SE		Amount of Each Disbursement this Period 299.75
City Washington State DC Zip Code 20003-4071	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Membership Dues Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Olson, Hagel & Fishburn, LLP		Transaction ID: B2244 Date of Disbursement 06 / 15 / 2006
Mailing Address 555 Capitol Mall, Suite 1425		Amount of Each Disbursement this Period 4757.11
City Sacramento State CA Zip Code 95814	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Legal & Reporting Services Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	13050.28
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

Full Name (Last, First, Middle Initial) A. Carol Pfeifer dba Pfeifer & Associates		Transaction ID: B2227 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 2350 Taylor Street, Suite 7		Amount of Each Disbursement this Period 5000.00
City San Francisco State CA Zip Code 94133	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Fundraising Consulting Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Carol Pfeifer dba Pfeifer & Associates		Transaction ID: B2231 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 2350 Taylor Street, Suite 7		Amount of Each Disbursement this Period 178.66
City San Francisco State CA Zip Code 94133	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Fundraising Expenses Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Carol Pfeifer dba Pfeifer & Associates		Transaction ID: B2255 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 6
Mailing Address 2350 Taylor Street, Suite 7		Amount of Each Disbursement this Period 1051.27
City San Francisco State CA Zip Code 94133	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Fundraising Expenses Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	6229.93
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

Full Name (Last, First, Middle Initial) A. Carol Pfeifer dba Pfeifer & Associates		Transaction ID: B2262 Date of Disbursement 06 / 29 / 2006
Mailing Address 2350 Taylor Street, Suite 7		Amount of Each Disbursement this Period 6500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City San Francisco State CA Zip Code 94133	Purpose of Disbursement Fundraising Consulting Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Political Data, Inc.		Transaction ID: B2259 Date of Disbursement 06 / 22 / 2006
Mailing Address P.O. Box 1706		Amount of Each Disbursement this Period 514.78 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Burbank State CA Zip Code 91507	Purpose of Disbursement Data Mailing Lists Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Sprint PCS		Transaction ID: B2248 Date of Disbursement 06 / 20 / 2006
Mailing Address P.O. Box 79357		Amount of Each Disbursement this Period 115.51 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City City of Industry State CA Zip Code 91716-9357	Purpose of Disbursement Phone Candidate Name Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	7130.29
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

Full Name (Last, First, Middle Initial) A. Staton & Hughes, Inc.		Transaction ID: B2238 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6
Mailing Address 185 Berry Street, Suite 1590		Amount of Each Disbursement this Period 6000.00
City San Francisco State CA Zip Code 94107	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Campaign Consulting Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Staton & Hughes, Inc.		Transaction ID: B2239 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6
Mailing Address 185 Berry Street, Suite 1590		Amount of Each Disbursement this Period 71.33
City San Francisco State CA Zip Code 94107	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Shipping Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Transvideo Studios		Transaction ID: B2241 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6
Mailing Address 990 Villa Street		Amount of Each Disbursement this Period 1059.23
City Mountain View State CA Zip Code 94041	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Video Production Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	7130.56
TOTAL This Period (last page this line number only) ▶	_____

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

Full Name (Last, First, Middle Initial) A. US Bank		Transaction ID: B2236 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6
Mailing Address P.O. Box 64799		Amount of Each Disbursement this Period 56.40
City St. Paul State MN Zip Code 55164	Purpose of Disbursement Bank Fee Candidate Name Category/Type: 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) B. US Bank		Transaction ID: B2260 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address P.O. Box 64799		Amount of Each Disbursement this Period 747.21
City St. Paul State MN Zip Code 55164	Purpose of Disbursement Bank Fee Candidate Name Category/Type: 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

803.61

TOTAL This Period (last page this line number only)

45539.66

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 50 / 56

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

Full Name (Last, First, Middle Initial) A. Angelides 2006		Transaction ID: B2234 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6
Mailing Address 50 Francisco Street, Suite 265		Amount of Each Disbursement this Period 5000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City San Francisco State CA Zip Code 94133		
Purpose of Disbursement Contribution to a Non Federal Committee	011 Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Boswell for Congress		Transaction ID: B2218 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address P.O. Box 6220		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Des Moines State IA Zip Code 50309		
Purpose of Disbursement Contribution	011 Category/ Type	
Candidate Name Leonard Boswell		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 3	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Francine Busby for Congress		Transaction ID: B2224 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address P.O. Box 712		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Cardiff State CA Zip Code 92007		
Purpose of Disbursement Contribution	011 Category/ Type	
Candidate Name Francine Busby		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 50	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	8000.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

Full Name (Last, First, Middle Initial) A. California Democratic Party		Transaction ID: B2225 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address 1401 21st Street, Suite 200		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Contribution Candidate Name Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Chase Card Services		Transaction ID: B2267 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 6
Mailing Address P.O. Box 94014		Amount of Each Disbursement this Period 3000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Palatine State IL Zip Code 60094-4014	Purpose of Disbursement Civic Donation Candidate Name Category/Type 012	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. JFK Kennedy Library		Transaction ID: S335 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 6
Mailing Address 1 JFK Street		Amount of Each Disbursement this Period 3000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Cambridge State MA Zip Code 02138	Purpose of Disbursement Civic Donation Candidate Name Category/Type 012	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	4000.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

Full Name (Last, First, Middle Initial) A. Joe Courtney for Congress		Transaction ID: B2246 Date of Disbursement 06 / 20 / 2006
Mailing Address P.O. Box 1372		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Vernon State CT Zip Code 06066	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Joe Courtney		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 02	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Democratic Congressional Campaign Committee		Transaction ID: B2263 Date of Disbursement 06 / 29 / 2006
Mailing Address 430 South Capitol Street, SE, 2nd Floor		Amount of Each Disbursement this Period 18000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Washington State DC Zip Code 20003	011 Category/ Type	
Purpose of Disbursement Excess Funds to National Party Committee		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Committee to Bring Back Baron		Transaction ID: B2245 Date of Disbursement 06 / 20 / 2006
Mailing Address P.O. Box 1071		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Seymour State IN Zip Code 47274	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Baron Hill		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 9	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	22000.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

Full Name (Last, First, Middle Initial) A. Harry Mitchell for Congress		Transaction ID: B2247 Date of Disbursement 06 / 20 / 2006
Mailing Address P.O. Box 23748		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Tempe	State AZ	
Zip Code 85285		
Purpose of Disbursement Contribution Candidate Name Harry Mitchell Category/Type 011		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ District: 5		

Full Name (Last, First, Middle Initial) B. Notre Dame de Namur University School of Business		Transaction ID: B2217 Date of Disbursement 05 / 18 / 2006
Mailing Address 1500 Ralston Avenue		Amount of Each Disbursement this Period 2500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Belmont	State CA	
Zip Code 94002		
Purpose of Disbursement Civic Donation Candidate Name Category/Type 012		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. San Mateo County Democratic Party (Federal)		Transaction ID: B2243 Date of Disbursement 06 / 14 / 2006
Mailing Address P.O. Box 370265		Amount of Each Disbursement this Period 1250.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Montara	State CA	
Zip Code 94037		
Purpose of Disbursement Contribution Candidate Name Category/Type 011		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	4750.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input checked="" type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

Full Name (Last, First, Middle Initial) A. Service League of San Mateo County		Transaction ID: B2214 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	
Mailing Address 727 Middlefield Road		Amount of Each Disbursement this Period 500.00	
City Redwood City	State CA	Zip Code 94063	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Civic Donation		Category/ Type 012	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	500.00
TOTAL This Period (last page this line number only)	39250.00

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
 Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 Madeleine Albright, Inc.

Nature of Debt (Purpose):
 Fundraising Travel Expenses

Mailing Address 901 15th Street, NW, Suite 500

City State ZIP Code
 Washington DC 20005

Outstanding Balance Beginning This Period		Transaction ID: D45	
638.26			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	638.26	0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 Chase Card Services

Nature of Debt (Purpose):
 Meals with Constituents

Mailing Address P.O. Box 94014

City State ZIP Code
 Palatine IL 60094-4014

Outstanding Balance Beginning This Period		Transaction ID: D30	
660.21			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
928.50	660.21	928.50	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 Chase Card Services

Nature of Debt (Purpose):
 Gifts for Constituents

Mailing Address P.O. Box 94014

City State ZIP Code
 Palatine IL 60094-4014

Outstanding Balance Beginning This Period		Transaction ID: D42	
377.58			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
66.28	377.58	66.28	

1) SUBTOTALS This Period This Page (optional).....	▶	994.78
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
 Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 Chase Card Services
 Nature of Debt (Purpose):
 Office Equipment

Mailing Address P.O. Box 94014

City State ZIP Code
 Palatine IL 60094-4014

Outstanding Balance Beginning This Period	Transaction ID: D47	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
1982.34	0.00	1982.34

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 First Class Plus, LLC
 Nature of Debt (Purpose):
 Fundraising Mail Services

Mailing Address 1750 Cesar Chavez Street, Unit E

City State ZIP Code
 San Francisco CA 94124

Outstanding Balance Beginning This Period	Transaction ID: D46	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
698.57	0.00	698.57

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 H & W Printing Company, Inc.
 Nature of Debt (Purpose):
 Fundraising Printing & Mail Services

Mailing Address 3616 Oak Lane

City State ZIP Code
 Mount Rainier MD 20712

Outstanding Balance Beginning This Period	Transaction ID: D36	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
1985.98	0.00	1985.98

1) SUBTOTALS This Period This Page (optional).....	4666.89
2) TOTALS This Period (last page this line number only).....	5661.67
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	